## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notifica	correspondence including de below or directed of the strong of the stron	ng the Patent, advance of the rewise in Block 1, by (a	rders and notification of n a) specifying a new corres	naintenance fees v pondence address	vill be ; and/or	mailed to the current (b) indicating a separ	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPOND	Fee(	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
29493	7590 10/02	/2007	liave					
HUSCH & EP 190 CARONDE SUITE 600	I he Stat addi tran	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
ST. LOUIS, MC	) 63105-3441						(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/050,023	01/15/2002		David D. Chase	D. Chase		74294-013	5503	
TITLE OF INVENTION	: SUPPORT APPAREL	SUCH AS BACK SUPPO	ORT AND SYSTEM					
			,					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$720	\$300	\$0		\$1020	01/02/2008	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS					
FOREMAN, J	ONATHAN M	3736	600-594000					
1. Change of correspond CFR 1.363).	ence address or indicatio	n of "Fee Address" (37		or printing on the patent front page, list				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3					
Number is required.	·		listed, no name will be	printed.		~		
			THE PATENT (print or typ	•				
recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Comp	oletion of this form is NO	data will appear on the part a substitute for filing an	atent. It an assign assignment.	ee is id	lentified below, the do	cument has been filed for	
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY	and STATE OR (	COUNT	RY)		
Iowa Resear	rch Foundation, U	niversity of	Iowa City, Iow	a				
Please check the appropr	riate assignee category or	eategories (will not be pr	rinted on the patent):	Individual X Co	orporati	on or other private gro	up entity Government	
4a. The following fce(s)	are submitted:	41	o. Payment of Fce(s): (Plea	se first reapply a	ny prev	iously paid issue fee s	hown above)	
Issue Fec	To ample ontitue discount o	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.						
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any					
			overpayment, to Depo	sit Account Numb	er _08.	-3460 (enclose ar	extra copy of this form).	
5. Change in Entity Sta	i <b>tus</b> (from status indicated is SMALL ENTITY stati		☐ b. Applicant is no long	ger claiming SMA	LL ENT	ΓΙΤΥ status. See 37 CF	R 1.27(g)(2).	
			d from anyone other than to Office.					
	11							
				Date		12/5/07		
Typed or printed name H. Frederick Rusche				Registration N	-			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this but /irginia 22313-1450. DC 313-1450.	CFR 1.311. The information U.S.C. 122 and 37 CFR 1.25 and 37 CFR 1.25 cFR 1	on is required to obtain or r 1.14. This collection is est depending upon the indive e Chief Information Office COMPLETED FORMS TO	ctain a benefit by t imated to take 12 idual case. Any co or, U.S. Patent and D THIS ADDRESS	he publ minutes omment Traden S. SENI	tic which is to file (and to complete, including so on the amount of tin hark Office, U.S. Depa D TO: Commissioner f	by the USPTO to process) g gathering, preparing, and he you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,	

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.